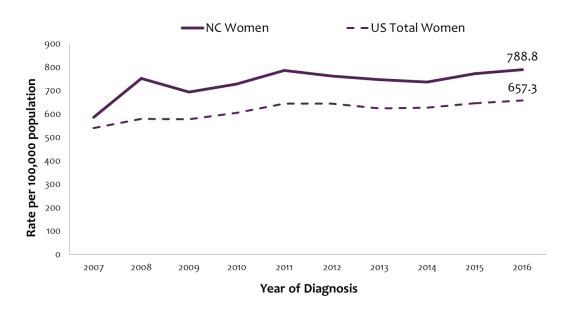
Chlamydia among Women in North Carolina 2016



Newly Diagnosed Chlamydia Rates among Women in North Carolina and U.S., 2007-2016



Chlamydia infection rates among women have been increasing since 2014.

North Carolina 2016:

- 41,128 cases reported among women
- 788.8 cases per 100,000 women

United States, 2016:

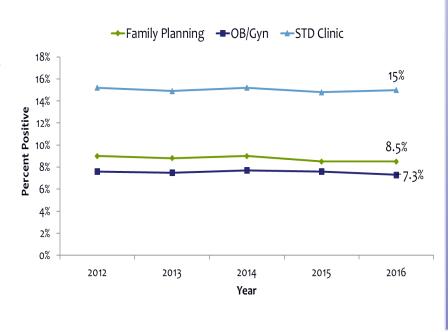
- 1,072,719 cases reported among women
- 657.3 cases per women
- The NC rate is higher than national rate, but similar to many Southeast states (CDC 2017).

Chlamydia Screening Results, Publically Funded Reproductive Health Care Settings, 2012-2016

Pelvic inflammatory disease and infertility caused by chlamydia can be prevented by testing women less than 25 years of age, whether or not they have symptoms.

This screening detects disease in women without symptoms.

Screening data from settings shown in the chart show no increase in chlamydia, suggesting that increases are due to the increased testing in other settings.



Want More Information?

HIV/STD/Hepatitis Facts and Figures website:

http://
epi.publichealth.nc.g
ov/cd/stds/
figures.html

Centers for Disease Control and Prevention (CDC) Fact Sheet on Chlamydia: https://www.cdc.gov/

Contact Us

std/chlamydia/

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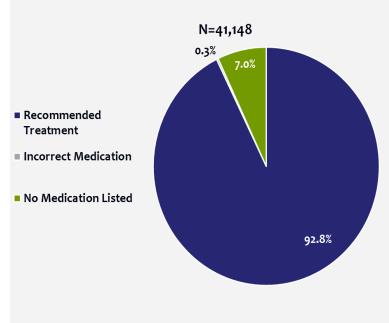
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Chlamydia among Women in North Carolina 2016

What is North Carolina doing to decrease chlamydia?

- In September 2014, the SLPH increased the age cut off for routine chlamydia screening in women from ≤24 years of age to ≤25 years of age.
- North Carolina provides funds for chlamydia screening for all women who are seen in a
 publically funded health care facility, such as local health departments and family
 planning settings.
- North Carolina supports expedited partner therapy for chlamydia; this therapy can help ensure that partners are treated, preventing reinfection. Resources and protocols can be found here: http://epi.publichealth.nc.gov/cd/lhds/manuals/std/treatment/Expedited Partner Therapy.pdf.

Chlamydia Treatment among Women, 2016



- In 2016, 93% of women received the correct treatment for chlamydia.
- Untreated or mistreated chlamydia can lead to severe health outcomes, including increased risk for HIV, PID, and infertility.
- Infants born to mothers with active chlamydia are also at risk for infection. In 2016, 14 babies were born to chlamydiainfected mothers and developed conjunctivitis.

What CLINICIANS can do

- Routinely ask patients about their sexual activity and test those that are sexually active
- Treat all pregnant women diagnosed with chlamydia promptly and correctly, by adhering to the CDC's STD Treatment Guidelines (link in side bar)
- Refer partners for treatment and consider implementing Expedited Partner Therapy (EPT)
- Both patient and partner must be treated to cure and prevent infection.

What YOU can do

If you have a chlamydia, ensure that you and your partners get treatment.



Recommendations from the CDC 2015 STD Treatment Guidelines:

Screening Recommendations:

- Annual screening of all sexually active women <25 years of age is recommended
- Screening among women ≥ 25 years of age should occur among women at increased risk for infection (e.g., have a new sex partner or more than one sex partner).

Data Source:

North Carolina Electronic Disease Surveillance System (NC EDSS) (data as of June 1, 2016), and North Carolina State Laboratory of Public Health testing data (data as of June 16, 2017).

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